B1

1. A rapidly dispersing solid therapeutic dosage form [comprised]consisting essentially of a water insoluble compound existing as a nanometer or micrometer particulate solid which is surface stabilized within one or more surface modifiers of which at least one [may be] is a phospholipid, the water insoluble particulate solid dispersed throughout a bulking matrix optionally also including a releasing agent forming a therapeutic dosage form when dried which when the dosage form is introduced into an aqueous environment the bulking/releasing matrix is substantially [completely] disintegrated within less than 2 minutes thereby releasing the water insoluble particulate solid in an unaggregated and/or unagglomerated state.

B2

3. (Amended) The rapidly dispersing solid dosage form of claim 1 wherein the bulking/releasing matrix component is selected from the group consisting of saccharides, polysaccharides, humectants, natural [or] polymers, synthetic polymers, inorganic additives, [or] and cellulose based polymers.

Claim 4, line 1, change "polyof" to --polyol--.

B3

9. (Amended) The rapidly dissolving solid dosage form of claim 1 wherein the disintegration time in an aqueous medium is less than 2 minutes[and preferably less than 60 seconds, more preferably less than 30 seconds, and the most preferably less than 10 seconds].

Please add new claims 11-13 as follows:

11. The rapidly dispersing solid dosage form of claim 9 wherein the disintegration time is less than 60 seconds.

12. The rapidly dispersing solid dosage form of claim 11 wherein the disintegration time is less than 30 seconds.

13. The rapidly dispersing solid dosage form of claim 12 wherein the disintegration time is less than 10 seconds.

REMARKS

Reconsideration of this application is requested. Claims 1-13 are active in the application subsequent to entry of this Amendment.

The claims have been amended in order to more particularly point out and distinctly claim that which applicants regard as their invention, and to address the issues raised in item 2 of the Official Action.

On page 2, item 2 of the Action the examiner questions the "distinction" between unaggregated and/or unagglomerated. Please see attached pages 66 and 67 from Powder Technology and Pharmaceutical Processes, Ed. D, Chuila, M. Deleuil and Y. Pourcelot, Elsiver, Amsterdam, 1994. Both terms in general refer to a cluster of things. In the case of an aggregate the same bonds that exist within the crystal link the individual crystals of drug to from the cluster. In the case of agglomerates the particles are linked by other types of bridges, such as those formed by excipients. It is possible for both aggregates